

Indiana Wing, Civil Air Patrol

Equipment Registration and Frequency Authorization

Tactical Call Sign: Red Fire ☐ NTIA COMPLIANT (On NTIA Approved Compliance List) ☐ New ☐ Modification ☐ Renewal
☐ HF-SSB ☐ VHF-AM ☐ VHF-FM (Wide Band) ☐ VHF-FM (Narrow Band) ☐ ISR ☐ FRS ☐ OTHER _____

Unit Information

Unit Name: _____ Charter Number: GLR-IN-

Applicant Information

Members Name: _____ Grade: _____ CAPID: _____
 Does the applicant possess a current copy of CAPR 100-1, Volume 1 and CAPR 100-1, Volume 3 and Indiana Wing Supplements and Communication's Letters? ☐ Yes ☐ No

Base Station Location Information

NOTE: Do Not Complete This Section If A Base Station Is Not Being Registered

Geographic Location: (May not be a P.O. Box or Rural Route) _____

Latitude: _____ ° _____ North Longitude: _____ ° _____ West Ground Elevation (MSL): _____ Feet
 What is the height of the highest CAP Antenna Feed Point on this site? _____ Feet
 Is the antenna supporting structure (mast, tripod or tower etc.) mounted on top of a building? ☐ Yes ☐ No If "Yes", what is the height of the building? _____ Feet
☐ Check if the HF-SSB Antenna on this site is fully HF capable (2-30 MHz). *Antenna Capability Is Determined By Design Or Either A Internal Or External Antenna Tuner*
 What is the name of the nearest airport? _____ Airport ID _____ What is the distance in statute miles? _____

Types of Equipment Registered			Make of Equipment	Model Number	Serial Number	CEMS Management Number (Corporate Owned Equipment Only)	OWNER			Frequency Bands					H A N D L E D	E M E R G E N C Y
B A S E	M O B I L E	A I R					C A P	A P P L I C A N T	O T H E R	A I I H F - S B	A I I V H F - A M	A I I V H F - F M	I N T R A S R Q U I D I S O	R A D I O F A M S I L R V		
SAR / ELT																

I hereby offer to Indiana Wing, Civil Air Patrol, for the use of official CAP Communication Purposes the radio equipment listed on the reverse side. This equipment is owned by myself or is in my legal custody. I affirm that the equipment is free of leans or encumbrances.

I understand that this agreement gives Indiana Wing, Civil Air Patrol operational control over the equipment when used for Civil Air Patrol purposes. I further understand that the equipment used on Civil Air Patrol Frequencies will be used only for official Civil Air Patrol Business as defined in current Civil Air Manuals, Regulations and other official Civil Air Patrol Documents.

Other Civil Air Patrol personnel, without my approval or consent may not use the listed equipment. Upon termination of this agreement, Indiana Wing Civil Air Patrol will not be responsible for the condition of the equipment, nor will CAP maintain or otherwise guarantee this equipment.

Indiana Wing, Civil Air Patrol or I may terminate this agreement at any time for any reason.

I understand that the frequency authorization is cancelled if the station location, equipment or charter number changes, I understand that upon termination of this agreement, further operation of this equipment on any Civil Air Patrol Frequencies is forbidden.

I certify that I am a current member of Indiana Wing, Civil Air Patrol and that the information herein is complete and accurate to the best of my knowledge. I further agree that Indiana Wing Civil Air Patrol will have complete control of the station, both as to physical operation and service connected.

_____ Applicant's Signature	_____ 28 July, 2005 Date
_____ Unit Communication's Officer Signature	_____ 28 July, 2005 Date
_____ Unit Commander's Signature	_____ 28 July, 2005 Date
_____ Indiana Wing Director of Communications or Licensing Officer's Signature	_____ 28 July, 2005 Date

Instructions

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| Tactical Call Sign | Enter the tactical call sign assigned by the Indiana Wing Licensing Officer to the applicant. Do not use the Indiana Wing Staff Call Sign if on Wing Staff. |
| Type of Application | Check "NEW" if the applicant does not currently have any compliant equipment authorized by Indiana Wing. Check "MODIFICATION" for existing authorizations. Check "RENEWAL" when renewing station authorizations. |
| Unit | Enter the Unit's Name, and Unit ID Number. If the applicant is not on wing staff, the authorization will be mailed to the Unit Mailing Address |
| Applicant | Enter all the applicants personnel information requested. Applicants mailing address should be the same as the National Data Base. |
| Station Location | Only complete this section if a land (base) station indicated. The Geographic Location may be the applicants mailing address if the address is not a P.O. Box or Rural Route. If the address is P.O. Box or Rural Route give detailed instructions from the nearest known fixed Geographic Point to the station Location |
| Equipment | List all Transmitters, Make, Model, and Serial Number. (If Corporate Owned the CAP Property ID Number and 1 copy of CAP Form 37C is required). Indicate the Civil Air Patrol Frequency Band for each piece of equipment. Indiana will authorize only equipment that is NTIA compliant. If the applicant has a practice ELT, list it as transmitter. Aircraft SAR Stations may not use CAP Call Signs. |
| Frequency Authorization Processing | The Applicant, Unit Director of Communications and Unit Commander must sign the application
<ol style="list-style-type: none">1. Prepare Indiana WING Form 32 in two copies. (Both Sides). Use Page 3 if necessary Attach Indiana Wing Form 33, Radio Equipment Frequency Certification as required.2. Forward to the Communications Licensing Officer, Indiana Wing |

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